



# Employee Update

## Our Mission:

To serve the people of North Carolina by enabling individuals, families, and communities to be healthy and secure, and to achieve social and economic well-being.

A monthly publication for employees of the North Carolina Department of Health and Human Services



# Happy Holidays!

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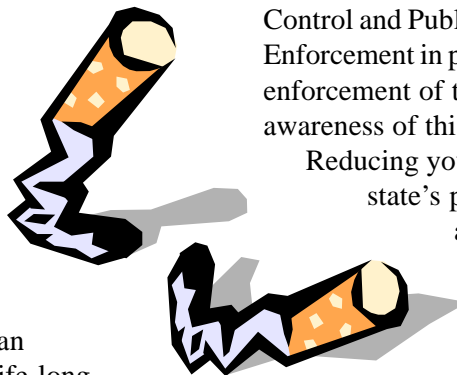
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# Kids in N.C. are smoking less

Lighting up has become more difficult for youngsters in North Carolina, according to this year's survey of more than 800 retail tobacco stores. Results of a survey show more than a 3 percent reduction in the overall rate of illegal youth tobacco sales in the past 12 months – down from 18 percent in 2002 to 14.8 percent in 2003.

“While reducing sales to minors cannot guarantee that teens do not have access to tobacco, it makes access more difficult, which is one of the factors that can ultimately reduce teens’ risk of becoming life-long smokers, and dying of tobacco-related illness,” said Margaret Brake, state coordinator for the Prevention of Underage Tobacco Use with the Division of Mental Health, Developmental Disabilities and Substance Abuse Services. State Chief for Substance Abuse Services Flo Stein credits ever-increasing cooperation and coordination between state regulators, local prevention programs and the retail merchants for the success.



“North Carolina has made great progress in reducing youth access to tobacco,” Stein said. “Much of our success is due to the efforts of the Department of Crime Control and Public Safety’s Division of Alcohol Law Enforcement in providing retailer training, active enforcement of the Youth Access Law and raising awareness of this issue in communities across the state.

Reducing youth access is one component of the state’s plan to prevent and reduce tobacco use among young people. The Annual Synar Survey, named for Congressman Michael Synar, is required by federal law to ensure that all states are showing progress in reducing tobacco sales to minors. The survey has been done since 1996, and sales rates in North Carolina have fallen from 50 percent in 1996 to the current rate. Brake also credits a grant from the N.C. Health and Wellness Trust Fund Commission’s Teen Tobacco Use Prevention and Cessation Initiative for enhancing this year’s effort. ■

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## Public Health receives grant to fight childhood obesity

The N.C. Health and Wellness Trust Fund Commission awarded \$371,000 to the Division of Public Health to be used over the next three years as part of a statewide campaign to address the epidemic of obesity among children and youth in North Carolina.

The grant is one of 17 awards totaling \$7.43 million to local, regional and state organizations and agencies chosen to be part of the Commission’s “Children, Youth and Community Obesity Prevention / Reduction Initiative.” The initiative is designed around guidelines issued by the N.C. Division of Public Health in its “Eat Smart, Move More...North Carolina” blueprint for social change (see [www.EatSmartMoveMoreNC.com](http://www.EatSmartMoveMoreNC.com)).

The Division of Public Health will use its grant funds to examine what causes physical inactivity and poor nutrition among minority children and to develop a social marketing campaign for communicating with minority communities, where the problem of obesity is especially acute. Other groups will use their grants to provide intervention programs for overweight children such as after-school exercise programs and nutritional counseling. Still others will focus efforts on public education and

adoption of local policies that address the underlying issues. In addition, the statewide UNC-TV network will create and air messages for both at-risk youth and their caregivers.

“We must reverse the alarming trend of obesity in our population,” said DHHS Secretary Carmen Hooker Odom. “The best place to start is with our children and youth.”

Obesity is one of the top causes of preventable disease in North Carolina, second only to tobacco. Children weighing too much is an epidemic in North Carolina, affecting about one in four youth 12 to 18 years of age, one in five children from 5 and 11, and one in eight preschool children ages 2 to 4.

Overweight children often become overweight adults, and are much more likely to suffer from diabetes, cardiovascular disease, cancer and other chronic health problems. In 2000, North Carolina taxpayers paid an estimated \$6.2 billion in excess healthcare costs due to physical inactivity and \$1.8 billion due to poor nutrition. ■



**Jalil Isa**

**¡Salud y Saludos!**

In late October, Secretary Carmen Hooker Odom spent a week in Mexico on a trip designed to expose her to the lifestyles and health care services in some of the poorer parts of the country.

Hooker Odom, who lived in Mexico as a baby because of her father's work, says she had a jam-packed itinerary during her recent stay. It was late to bed and early to rise, thanks in part to the organizers of the trip, the N.C. Center for International Understanding. The organization sets up teacher exchange programs and brings various community leaders to other parts of the world that may have some tie to North Carolina.

The Secretary visited poor, rugged sections of Michoacán, one of the Mexican states. There, she saw firsthand the challenges women encounter as they carry out their daily lives without their husbands. According to Hooker-Odom, it's unusual to find men in some places because so many are working in the U.S.

With anywhere from 65 to 75 percent of Latinos who live in North Carolina coming from Mexico, it should be no surprise the Secretary would choose to visit this Latin American country as a way to learn how health care works, and in some cases does not work, there.

For starters, Hooker Odom learned about the *curanderos*, local folk healers who are highly respected in their communities. Folk healing has roots that predate European settlements. The people of Mexico, as well as people of many other Latin American countries, often visit a *curandero* before seeing a medical doctor.

These folk healers blend a mixture of herbs into a tea that is believed to be a beneficial treatment for various maladies. In other instances, the healer may even do a special massage or rub over a sick part of the body in the hopes of helping cure whatever may ail the patient. These ancient customs are part of the belief system of people who may eventually find themselves needing medical assistance in this country.

Another noteworthy aspect of health practices in Mexico that the Secretary saw involves the use of lay health advisors/practitioners. The lay health advisor in Mexico is often a local or community leader who has received training to help tend to patients in their neighborhood.

More often these days in Mexico, local governments are trying to enhance the training of these lay health advisors so they can play a role in preventive medicine, a concept which in some cases is not familiar to Hispanics. Lay health advisors often are viewed with less skepticism than traditional doctors by many folks. This, in part, is due to the ability of the lay health advisors to relate to their community. Most times, these lay health advisors are women who can easily establish a one-on-one relationship with people around them. As a result, the advice some of these lay health people may dispense is followed closely.

The use of these lay health advisors is something NCDHHS is working to promote. The Secretary's latest trip to Mexico has reaffirmed the positive outcome of better understanding of traditional Mexican and other Latino health practices. ■

*Jalil*

# Good health manners

## *Tips for preventing the spread of germs*

During the cough, cold and “flu” season, there are some simple tips that will keep respiratory infections from spreading. Respiratory infections affect the nose, throat and lungs; they include influenza (the “flu”), colds, pertussis (whooping cough) and severe acute respiratory syndrome (SARS). The germs (viruses and bacteria) that cause these infections are spread from person to person in droplets from the nose, throat and lungs of someone who is sick.



Year-round, you can help stop the spread of these germs by practicing “respiratory etiquette” – good health manners – by covering your nose and mouth every time you sneeze, cough or blow your nose; putting used tissues in the trash; and washing your hands well and often whenever you or someone you are close to is sick. Clinics and hospitals may also give you a face-mask to wear in waiting areas and exam rooms if you have a fever and cough or rash, so be prepared!

Here are some tips to keep from spreading your germs to others, and to keep from catching someone else’s germs.

### **Keep your germs to yourself:**

- Cover your nose and mouth with a tissue when sneezing, coughing, or blowing your nose.

## **Umstead doctor honored**

Duke University honored Dr. Linwood Allsbrook for his distinguished service to the Child and Adolescent Psychiatry Training Program.

Allsbrook, site director for the Child Psychiatric Institute at John Umstead Hospital in Butner, received the Honored Professor Award on Oct. 22 at a Duke

- Throw out used tissues in the trash as soon as you can.
- Always wash your hands after sneezing, blowing your nose, or coughing, or after touching used tissues or handkerchiefs. Wash hands often if you are sick.
- Use warm water and soap, or alcohol-based hand sanitizers, to wash your hands.
- Try to stay home if you have a cough and fever.
- See your doctor as soon as you can if you have a cough and fever, and follow their instructions, including taking medicine as prescribed and getting lots of rest.
- If asked to, use face-masks provided in your doctor’s or clinic waiting room and follow their instructions to help stop the spread of germs.

### **Keep the germs away:**

- Wash your hands before eating, or touching your eyes, nose, or mouth.
- Wash your hands after touching anyone else who is sneezing, coughing, blowing their nose, or whose nose is running.
- Don’t share things like cigarettes, towels, lipstick, toys, beverages or anything else that might be contaminated with respiratory germs.
- Don’t share food, utensils or beverage containers with others.

The DHHS Communicable Disease Control website has more information on “good health manners” at [www.epi.state.nc.us/epi/gcdc/infectioncontrol.html](http://www.epi.state.nc.us/epi/gcdc/infectioncontrol.html). ■

University Medical Center divisional facility meeting. He has served as the interim director for the Child and Adolescent Psychiatry Training Program at Duke University for two years.

The Child Psychiatric Institute is a unit of John Umstead Hospital. The Institute serves children and adolescents with psychiatric disorders. ■

# Partnerships forged to address health disparities in N.C.

More than 200 attendees from the faith community, community-based organizations and the North Carolina Division of Public Health met in Greensboro last month to formulate action steps for improving the health status gap between minority populations and the general population in North Carolina.

The “Faithful to the Call: Improving Health through the Faith and Public Health Partnership” conference focused on eight areas of greatest health disparities in North Carolina: infant mortality, cancer, diabetes, cardiovascular disease, asthma, homicide, HIV/AIDS and sexually transmitted diseases. All cause a higher burden of poor health and premature deaths among North Carolina’s communities of color than among whites.

Attendees focused on forming partnerships, sharing best practices in addressing health disparities and developing immediate action steps to be implemented locally or regionally. The conference, held Nov. 5-7, resulted in the signing of a resolution by representatives from the faith

community, community-based organizations and the Division of Public Health to form a “Faithful to the Call” Partnership. This new partnership is committed to the development of action plans and progress measures to further address health disparities, to good use of resources and to sharing of those resources.

“The Division of Public Health is dedicated to eliminating health disparities, but we know that we cannot do it alone,” said State Health Director Leah Devlin. “It will take a host of resources – both human and financial – to improve the health of minority North Carolinians and to close the health status gap” she said. “Faith communities are essential to this effort, and we welcome opportunities to work with them to make that happen.”

More information on minority health and health disparities can be found at [www.ncminorityhealth.org](http://www.ncminorityhealth.org), or call (919) 431-1613 to see how your local faith community or community-based organization can begin to address public health disparities.

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## Jackson heads Division of Services for the Blind

Debbie Jackson has been named director of the Division of Services for the Blind (DSB). She began her duties Dec. 1.



Debbie Jackson

“I am pleased to announce that Debbie Jackson has accepted this position,” said DHHS Secretary Carmen Hooker Odom. “I know from her work with former director John Deluca in her role as assistant division director for programs and facilities, she will be able to hit the ground running as division director.

Debbie brings a wealth of experience as well a tremendous level of energy and creativity to her position as division director.” Deluca accepted a position with the N.C. Industrial Commission.

“I am honored to have the opportunity to serve the blind and visually impaired people of North Carolina as the director of the Division of Services for the Blind,” said Jackson. “I am very fortunate to be coming into a situation where the directors who preceded me have laid the groundwork for good relationships with our

consumers, the Lions of N.C. and many others, and where the staff is committed to providing high quality services to every person who can benefit.”

Jackson has more than 20 years of service with DHHS, starting in 1979 as a vocational rehabilitation counselor with the Division of Vocational Rehabilitation Services. She also spent 10 years as director of DVR’s Client Assistance Program. She has been with DSB since April 1994.

During her time with DSB, Jackson moved the division forward in its use of technology. The division now has a LAN and remote access for all staff. She also expanded the division’s client database and the availability of adaptive technology for blind and visually-impaired staff.

The division now has four field-based positions devoted to meeting the technology needs of staff and consumers. This has fostered an environment where staff are encouraged to develop their skills and try new ideas, and resulted in the receipt of a Kate B. Reynolds/AmeriCorps grant focused on providing technology services to blind and visually impaired consumers in rural parts of North Carolina.



# Ten tasty ways to color your holidays

Healthy fruits and vegetables are the perfect holiday foods. As nature's vitamin pills, they are packed with nutrients that help fight winter's colds and infections. As nature's fast foods, they are perfect to eat-on-the-run during the hectic holiday season. As nature's bountiful rainbow, they can brighten any festive table.

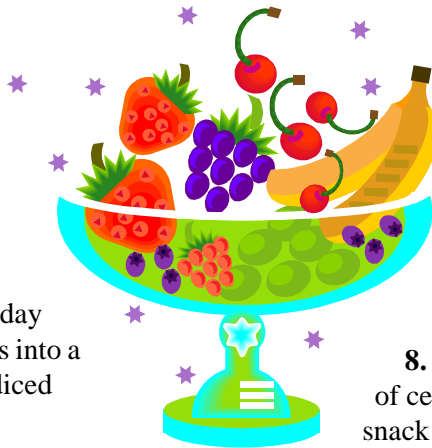
Unfortunately, only 1 in 4 American adults gets the minimum 5 to 9 daily servings of fruits and veggies for optimal health. Here are ten tasty ways that you can change that and enjoy all the colors of holiday health.

**1. RED:** Slice a red pepper onto a holiday pizza dinner. Sprinkle dried cranberries into a spinach salad. Stir tomato sauce and diced tomatoes into heart-warming chili.

**2. GREEN:** Toss a festive salad with baby spinach leaves and lettuce in every shade of green: Romaine lettuce, Boston lettuce, Bibb lettuce and butter lettuce.

**3. WHITE:** Use a cookie cutter to create turnip, rutabaga or jicama stars for a seasonal vegetable tray. Grab a banana for dashboard or desktop dining opportunities.

**4. GOLD:** Mash Yukon gold potatoes with light sour cream for a favorite holiday comfort food. Bake acorn or winter squash with a little olive oil and brown sugar.



**5. YELLOW:** Sauté summer squash and/or yellow peppers into a zesty vegetable medley. Serve canned pineapple slices as a garnish or a naturally sweet dessert.

**6. ORANGE:** Pour orange juice (calcium-fortified) into a morning juice glass. Peel an orange for a refreshing snack. Stir a can of mandarin oranges into a fruit salad.

**7. PINK:** Enjoy half a pink grapefruit morning, noon or night. Pour pink grapefruit juice into some apple juice for a layered "mocktail" in sunset hues.

**8. BLUE:** Sprinkle fresh blueberries into a bowl of cereal. Add dried blueberries into a healthy snack mix. Stir frozen or canned blueberries into vanilla or blueberry yogurt.

**9. PURPLE:** Put fresh plums or dried plums (lemon, orange or cherry flavored prunes) into a brown bag lunch. Include eggplant in a spicy Asian stir-fry.

**10. Eat the color way – every day!** For optimal health, keep your eye on the prize: 5 to 9 servings of colorful fruits and vegetables every day of the year.

N.C. Division of Public Health - Nutrition Services  
National Nutrition Month® 2003  
Adapted by the NC NET Program from Eat Right Montana materials

## Keller joins Division of Public Health staff

The latest addition to the North Carolina Tuberculosis (TB) Program is Jimmy Keller, TB Public Health Advisor. He comes to North Carolina's General Communicable Disease Control Branch from the Centers for Disease Control and Prevention (CDC).

After completing a 20-year Air Force career, Keller started his public health career with CDC in 1991 in the STD (sexually transmitted disease) program in Miami, Fla. In 1992, he moved to the New York City STD

Program, and in 1995 accepted a position as a supervisory public health advisor in the city's TB Program. In 1998, he moved to Detroit as senior public health advisor in their TB Program. From there, he moved to Columbus, OH, in 2001 to fill a vacancy as the senior public health advisor for the Ohio TB Program. Keller started work in the North Carolina TB Program on Nov. 17 under the state's TB medical director, Dr. Carol Dukes Hamilton.

# Ten ways to 'Take 10' for healthy holidays

Holidays are stressful. Too much food, too much alcohol, too much shopping, too many parties, too many people and even too much fun. It can all add up to feeling exhausted, overwhelmed and completely stressed out. Fortunately, we can change our reactions to the pressures of the season and keep our brains and our bodies healthy. Here are ten easy ways to take 10

minutes to "de-stress" in the midst of the usual holiday commotion.



- 1. Take a break:** 10 minutes is all it takes. A small break can make a big difference in your attitude. Regular relaxation can also help fight off colds and other infections.

**2. Take a walk:** Moving for 10 minutes can help you maintain a healthy weight and a healthy attitude. Take three 10-minute walks and your heart will get the benefits too!

**3. Take a nap:** A good night's sleep is essential for good health, especially when your days are beyond busy. A 10-minute daytime nap can also help boost energy levels.

**4. Take a bath:** With or without bubbles, running water is relaxing. A 10-minute bath (or shower) can soothe tired muscles and release holiday tensions.

**5. Take a call:** It does make a difference to "reach out and touch someone." Connect with a special friend or family member for 10 minutes by phone or in person.

**6. Take a dog break:** Fresh air is good for humans and animals. Take 10 minutes to throw a few balls and bring some sunshine into your life and the dog's life!

**7. Take a child break:** Children have the right attitude toward holidays – wonder and joy. Just 10 minutes with a child can help revive anyone's sagging spirits.

**8. Take a book break:** A good book can give you a healthy rest from the holiday hubbub. Put all your lists aside for 10 minutes and curl up with a book and a cup of tea.

**9. Take a snack break:** Stress often leads to overeating. Sit down for 10 minutes and eat a nutrient-rich snack, like fruit and cheese, half a sandwich or a handful of nuts.

**10. Take a music break:** Holiday songs, carols and hymns are a lovely way to take a break, to relax or to even dance. Try a 10-minute sing-a-long as a stress reliever.

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## Price receives assistive technology leadership award



U.S. Rep. David Price, left, received the 2003 Assistive Technology Leadership Award for his support of assistive technology services to North Carolina citizens with disabilities and for his leadership to continue federal funding for critical assistive technology programs. "Congressman Price has been a great friend, not just to our assistive technology program but to our entire department," said Secretary Hooker Odom, center, in presenting the award. "We appreciate your support and your leadership in Washington." Suzanne Meek, right, a member of the Assistive Technology Advisory Council, joined in the presentation. Former award recipients include the Kate B. Reynolds Charitable Trust, U.S. Rep Bob Etheridge, state Sen. John Kerr, and State Auditor Ralph Campbell for the IRMC, Coalition 2001.

# Direct care worker at Umstead receives award

As the state faces a critical shortage in direct care workers, at least one organization is recognizing workers for the essential services they provide. The Orange County chapter of the National Alliance for the Mentally Ill recently honored Robert Harris, a health care technician on the children's psychiatric unit at John Umstead Hospital.

NAMI Orange awarded Harris with the Mary Magdalene Flamer Award for 2003. The award, renamed for an Umstead Hospital patient killed in a 1996 traffic accident, annually recognizes a non-professional direct care staff member for outstanding service and dedication

to patients. Harris received a plaque and a \$100 gift at a ceremony this fall.

Barbara Nettles-Carlson, president of NAMI Orange, stated, "Mr. Harris helps create a safe nurturing environment that enables the patient to move toward wellness."

John Umstead Hospital, located in Butner, serves 16 counties in the North Central region. The inpatient facility diagnoses and treats people with psychiatric disorders.

## Adoption Profile

### Introducing Tarasha

Tarasha can be a very sweet and funny child. She is playful, creative and likes to color, play dress up and visit the park. Tarasha loves other children and enjoys helping others, especially in school. She is a talented dancer and would love to be able to take dancing lessons. Tarasha attends a specialized class at school where she is better able to control her conduct. She is a bright child with excellent grades and has made the school's A/B honor roll. With the help of counseling and medication, Tarasha has made tremendous improvements in her behaviors and attitude. Her foster mother has seen significant progress in all areas of Tarasha's life. It is important that she continue her counseling and continue to work on controlling her emotions.



### A Family for Tarasha

A family trained in therapeutic care would be ideal for Tarasha. She needs to live in a highly structured, stable environment with a family that loves her, but is consistent and can carry through with appropriate consequences. Tarasha has proven she can change with the help of loving and supportive people. Now she needs a family to share that with. (NC #051-1933)



**Tarasha**  
b. Dec. 12, 1993

For more information on Tarasha or adoption in general, call NC Kids toll free at 1-877-NCKIDS-1 (1-877-625-4371).